

## **MEDICAL SCREENING AND WAIVERS**

### **1. Medical Screening**

a. Current Physical Examination, PHA (reference (f)), PARFQ, medical referral and evaluation, waivers, and Operational Risk Management are primary tools to ensure safe participation of members in PFA and physical conditioning.

b. PRIMS is primary means of organizing and documenting Physical Readiness Program information including medical screening. CFL shall use PRIMS in execution of this instruction.

#### **c. Current Physical Examination**

(1) Members who do not have a required physical examination (reference (g)) shall not participate in a PRT or physical conditioning until such exam is completed. Members can participate in BCA.

(2) Verification of current physical examination shall be documented using PRIMS.

#### **d. PHA**

(1) Active duty members shall receive an annual PHA. PHA provides mechanism for clearance to participate in PFA for a 12-month period. As of January 2003, members who do not have current PHA shall not participate in PRT or physical conditioning until such assessments are completed. (Members without current PHA prior to January 2003 shall have current physical examination and clearance for PFA by a credentialed provider).

(2) Where mission/operational requirements permit, it is recommended that PHA be completed during member's birth month.

e. Reserve Personnel. Reserve personnel may be cleared for participation in the PRT for a 12-month period upon completion of the Annual Certificate of Physical Condition (NAVMED 6120/3) (short form physical) or a long form physical.

f. PARFQ

(1) CFL shall distribute PARFQ for review for each PHA. Members shall bring completed PARFQ to PHA appointment to facilitate clearance for participation in PFA, FEP and or physical conditioning.

(2) PARFQ questions are available online through PRIMS at website <https://prims.persnet.navy.mil/prims> or may be reproduced locally on a SF 600, Chronological Record of Medical Care.

(a) Section A

1. Are you a male greater than 40 years old or a female greater than 50 years old and do not participate in a consistent aerobic exercise activity three to five times weekly?

2. Has your mother or sister died without any explanation (sudden death) or suffered from a heart attack before the age of 55?

3. Has your father or brother died without any explanation (sudden death) or suffered from a heart attack before the age of 45?

4. Are you a current tobacco user?

5. Do you have high blood pressure or are you on blood pressure medication?

6. Has a doctor ever told you that you have high cholesterol or are you on cholesterol medication?

7. Do you have diabetes?

8. Are you sedentary (don't exercise at least three to five times per week for at least 30 minutes)?

9. Do you have any personal history of thyroid, renal, or liver diseases?

10. Have you ever passed out during exercise?

11. Have you ever been told you have a heart murmur?

12. Have you ever been dizzy or lightheaded during or after exercise?

13. Do you have known cardiac (heart) disease?

14. Has a health care provider ever denied or restricted your participation in sports?

15. Do you tire more quickly than your friends do during exercise?

(b) Section B Signs and Symptoms

1. Do you feel pain in your chest, neck, jaw, or arms when doing physical activity?

2. Do you experience any shortness of breath with moderate continuous exercise?

3. In the last month have you felt chest pain at rest?

4. Have you had a severe viral infection such as myocarditis or mononucleosis within the past month?

5. Have you experienced episodes of rapid beating or fluttering of the heart?

6. Have you unintentionally lost or gained more than 10 percent of your body weight since the last PFA?

7. Do you suffer from lower leg swelling of both legs?

8. Do you have difficulty breathing or have sudden breathing problems at night?

9. Do you have a bone, joint, or muscle problem that may prevent you from doing physical activity of any kind?

(3) Members who answer "yes" to any question shall be assessed by a medical department representative (MDR) for further evaluation regarding participation in PFA or physical conditioning. MDR shall be a medical doctor, doctor of osteopathy, family or adult nurse practitioner, physician assistant, or independent duty corpsman.

(4) Pre-physical activity questions. At time of PRT, and immediately prior to any physical conditioning directed and supervised by command, members shall be asked by CFL or authorized representative about general health.

(a) Members who answer "yes" to any of the following questions shall be assessed by an MDR for further evaluation regarding participation in PRT or physical conditioning. (MDR shall be a Licensed Independent Provider, PA, or IDC).

1. Has your health care provider ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?

2. Do you feel pain in your chest when you do physical activity?

3. In the past month, have you had chest pain when you are not doing physical activity?

4. Do you lose your balance because of dizziness or do you ever lose consciousness?

5. Do you have a bone or joint problem that could be made worse by a change in your physical activity?

6. Is your health care provider currently prescribing drugs (for, example, water pills) for your blood pressure or heart condition?

7. Do you know of any other reason why you should not do physical activity?

(b) Members recovering from recent self-limiting illness (such as a cold, gastrointestinal disturbance, minor injury) shall not participate in PRT or physical conditioning. Members may participate once episode subsides.

(c) Members reporting change in health or risk factors (such as tightness or discomfort in chest, arms or neck associated with activity or exercise) shall not participate in PRT or physical conditioning. CFL shall refer members to medical department for evaluation. Members must be cleared by MDR prior to participation in PRT or physical conditioning.

g. BCA

(1) Medical department must evaluate members prior to participation in PRT or physical conditioning upon initial failure to meet BCA standards. Evaluation shall include at a minimum

- (a) Blood pressure assessment.
- (b) Serum/plasma lipids, blood glucose, TSH.
- (c) Cardiovascular risk assessment.
- (d) Current medications, including over the counter drugs, supplements, herbals, and vitamins.
- (e) Tobacco use.
- (f) Family history, with particular focus on obesity and cardiovascular disease.
- (g) Current physical activity.
- (h) Motivation for weight loss.
- (i) Other assessments as medically indicated.

(2) A Licensed Independent Provider or PA shall document in medical record after evaluation any medical condition predisposing members to obesity. Members not found to have a medical condition predisposing them to obesity shall be referred to command for appropriate directing and monitoring of member's FEP.

(3) Written recommendations shall be provided to member's command regarding any physical activities in which members should not participate as well as specific activities in

which members may safely participate. Members shall be provided with recommended weight loss targets and physical activity recommendations. Members may be referred to local weight control programs, stress management, tobacco use cessation programs, and specialty clinics as deemed appropriate. Recommendation for participation in Shipshape shall be made, if members qualify.

## 2. Medical Referral and Evaluation

a. Members shall be referred to medical department for evaluation and clearance to participate in PRT and physical conditioning if members:

- (1) Do not have required current periodic physical examination.
- (2) Do not have current PHA.
- (3) Answer "yes" to any question on
  - (a) PARFQ other than use of tobacco products, or
  - (b) Pre-physical activity questions.
- (4) Fail to meet BCA standards for first time in career.
- (5) Are 50 years of age or older and have not successfully completed all portions of a PRT in last 12 months. PRT must have been in conjunction with a PFA and documented.

b. CFL shall provide written referral clearly stating reasons members are referred. Use PRIMs.

c. Members who answer "yes" to any question on PARFQ and were previously cleared to participate for that response do not need to be referred on subsequent PFAs as long as

- (1) Condition has not worsened.
- (2) No new risk factors are present.

d. Completion of PARFQ by member shall be documented using PRIMs.

### 3. Medical Waivers

a. Command-approved members of medical department may recommend medical waiver for any aspect of Physical Readiness Program. Commanding officers shall appoint in writing those qualified members of medical department who are to conduct medical waiver evaluations. Appendix A of this enclosure provides guidance on medical procedure and shall be used to determine recommendations made to member's CO regarding waivers.

b. Members shall be issued medical waivers from participation in all or part of PFA or physical conditioning when a well-documented medical condition prevents

(1) Valid assessment of physical fitness in PFA, or

(2) Safe participation in PFA components or physical conditioning.

c. Medical waivers are subject to CO's final approval and shall be evaluated upon member's transfer to another command or change in CO.

d. Medical waiver recommendations shall be documented in writing

(1) PFA components (PRT or BCA) waived.

(2) Restrictions placed on participation in FEP (physical training).

(3) Recommended physical activities to help members maintain physical fitness and control body fat.

(4) Prohibited physical activities.

(5) Expiration date.

(6) In some circumstances where chronic injuries preclude participation in certain PRT events, an extended medical waiver may be warranted. If recommended by medical and approved by the CO an extended waiver may be granted. See appendix A to enclosure (3).

e. Medical waivers from participating in all or part of PFA or physical conditioning are not waivers from other unspecified parts. For example, members waived from push-ups and curl-ups must participate in sit-reach, cardiovascular fitness assessment, and BCA.

f. Medical waiver recommendations from participation in BCA shall only be issued for members who are recuperating from a medical or surgical condition that interferes with accurate and valid measurement. Waiver recommendations shall

(1) Not exceed 6 months duration. Members requiring a waiver exceeding 6 months in duration shall be referred to Limited Duty/Medical Board (LIMDU/MEDBOARD) for further evaluation.

(2) Be in writing by a board eligible or certified specialist (e.g., surgeon, endocrinologist) and reviewed by the department head of the specialist recommending the waiver.

g. CFL shall document medical waiver specifications using PRIMIS.

h. Pregnancy

(1) After confirmation of pregnancy by a health care provider, pregnant servicewomen shall not be required to meet PRT and BCA standards from the time the pregnancy is confirmed until 6 months following delivery.

(2) Pregnant servicewomen shall continue to participate in an ongoing exercise program as recommended by OB health care provider.

(3) Following the termination of a pregnancy (e.g., abortion, miscarriage), a medical evaluation by a health care provider should be obtained to determine whether or not a servicewoman may participate in physical conditioning, FEP, and/or a regularly scheduled PFA.



## MEDICAL PROCEDURE RECOMMENDATION

